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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:

Lee et al.

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DIAGNOSIS AND TREATMENT OF CARDIOVASCULAR

Michelle Quinn

CONDITIONS

Examiner:

Zachariah Lucas

Art Unit:

1648

CERTIFICATE OF MAILING UNDER 37 C.F.R. §1.8(a)

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Sir:

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[X] Amendment

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If the enclosed papers are considered incomplete, the Mail Room and/or the Application Branch is respectfully requested to contact the undersigned at (617) 646-8000, Boston, Massachusetts.

Applicant hereby requests a three month extension of time. A check in the amount of \$1020.00 is enclosed to cover the extension fee. If the fee is insufficient, the balance may be charged to the account of the undersigned, Deposit Account No. 23/2825. A duplicate of this sheet is enclosed.

Respectfully submitted, *Lee et al.*, *Applicant*

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